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441—117.8 (237) Specific in-service training required.

117.8(1) Cardiopulmonary resuscitation (CPR). All foster parents shall maintain their CPR certification and a certificate or card indicating the date of training and expiration. The training shall be provided by:

- a. A nationally recognized training organization, such as the American Red Cross, the American Heart Association, the National Safety Council, or Emergency Medical Planning (Medic First Aid), or
 - b. An equivalent certified trainer and curriculum approved by the department.
- **117.8(2)** *First aid.* All foster parents shall be certified in first aid at least every three years and shall maintain their first-aid certification and a certificate or card indicating the date of training and expiration.
- 117.8(3) Child abuse reporting. Each foster parent shall complete an approved mandatory child abuse reporter training every five years after the foster parent's initial preservice mandatory child abuse reporter training relating to the identification of child abuse and the requirements and procedures for the reporting of child abuse pursuant to Iowa Code section 232.68.
- a. Training provider. The foster parent shall be responsible for obtaining the required two-hour mandatory reporter training on child abuse identification and reporting as approved by the Iowa department of public health. A list of approved training opportunities is available on the Iowa department of public health Web site by searching "mandatory reporter training."
- b. Documentation. The foster parent shall secure documentation of the training content, amount, and provider and shall forward the documentation to the recruitment and retention contractor, who will provide the documentation to the department for inclusion in the foster parent's licensing file.
- **117.8(4)** Caring for children with HIV. Before placement of an HIV-infected child occurs, the foster parents shall complete the course "Caring for Children With HIV" or an approved alternative course that contains information on the unique aspects of pediatric HIV disease, transmission and infection control, the spectrum of HIV disease, confidentiality, death and bereavement, and self-care for the caregiver.

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